Application for Employment

Please fill out this form completely for employment consideration. Return the application to Crestone Town Hall when completed. You may include a résumé with your application, but the application must be completed.

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, sexual orientation, gender identity or handicap. The Town of Crestone is an equal opportunity employer.

Last Name	First Name	Middle Name	Date
Street Address		Home Phone:	1
		Cell:	
PO Box			
City, State, Zip			
Email Address			
Personal Information			
What was your previous address	?	How long at p	revious address? Years Months
Are you over 18 years of age? If not, employment is subject to y	Yes No		
	yment with us? Yes	No	
If Yes: Month and Year			
Are you legally eligible for emplo	oyment in the United States?	When will you be	e able to work?
Are you employed now?	_ Yes No	If so, may we inq employer?	uire of your present
Have you been convicted of a crithas not been annulled, expunged	me in the past ten years, excluding miso or sealed by a court?		mary offenses, which No
If Yes, describe in full:			
	you might not be able to perform the jo _Yes No	ob duties (with a rea	sonable

Driver's License #	State:
Any Violations? Yes No	

Military (Complete this section if you served in the U.S. Armed Forces)

Branch of Service:	Period of Active Duty (Month and Year)	
	From: To:	
Describe your duties and any special training:	Rank at Discharge:	
	Date of Final Discharge:	

Education

School	Name and Location of School	Course of Study	No. of years completed	Did you graduate?	Degree or Diploma
College					
High					
School					
Trade					
School					
Other					

Employment History (Please give accurate, complete full-time and part-time employment record, starting with your present or most recent employer.)

	Company Name	Telephone:	
1.	Address	Employed (Start Month and Year) From: To:	
	Name of Supervisor	Hourly Rate Start: Last:	
	Start Job Title and Describe Your Work	Reason for Leaving:	
	Company Name	Telephone:	
2.	Address	Employed (Start Month and Year) From: To:	
	Name of Supervisor	Hourly Rate Start: Last:	
	Start Job Title and Describe Your Work	Reason for Leaving:	
	Company Name	Telephone:	
3.	Address	Employed (Start Month and Year) From: To:	
	Name of Supervisor	Hourly Rate Start: Last:	
	Start Job Title and Describe Your Work	Reason for Leaving:	

	Company Name	Telephone:
	Address	Employed (Start Month and Year)
4		From: To:
4.	Name of Supervisor	Hourly Rate
		Start: Last:
	Start Job Title and Describe Your Work	Reason for Leaving:

We may contest the annularious listed	Do Not Contact
We may contact the employers listed above unless you indicate those you	Employer Number(s):
do not want us to contact.	Reason:

References: Give below the names of three persons not related to you, whom you have known at least one year.			
Name	Address	Phone/email	Years Acquainted
1.			
2.			
3.			

This information provided in this Application for Employment is true, correct and complete. If employed, any misstatements or omissions of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

If you decide to research my history of criminal arrests and warrants, I authorize you to do so. If a report is obtained you must provide, at my request, the name and address of the agency so I may obtain from them the nature and substance of the information contained in the report.

Date	Signature

Please complete and mail or deliver this form to:

Town of Crestone 108 W. Galena Ave. PO Box 64 Crestone, CO 81131 Phone (719) 256-4313 crestoneclerk@fairpoint.net